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		APPLICA:	olumn 2)	SMALL ENTITY				OTHER THAN SMALL ENTITY								
BASIC FE	FOR E		NUMBER FILED N/A		NUMBER EXTRA		-	RATE (1)		FEE	_	R	RATE (\$)		FEE (1	
8EARCH FEE (37 CFR 1 16(N, (1), or (m))			N/A		N/A.		-	NA		150.0			N/A		300.00	
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(3) CFR 1.16(q), (p), α (q)) TOTAL CLAMS 3) CFR 1.16(f)) NDEPENDENT CLAMS		or (q))	174		, NA			N/A .		\$100			NA		\$200	
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IULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1))								+180=				+36	50=	 		
Wither differ	rence in	column 1 is les	s than zero	, enler "O" in co	olumn 2			TOTAL	T		7	TO		 	, 	
8/1/2	. / .	(Column 1) CLAIMS REMAINING		(Column HIGHES NUMBE	n 2)	(Column 3) PRESENT	· 	SMAL	L EN	ΙΤΙΤΥ	OR	, <u>s</u>	OTHER MALL I	THAN ENTIT	!	
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Applica	tion Size	Fee (37 CFR	1.16(s))	<u> </u>		(0)	: -	×100 =	╁-		OR	X200		[
FIRST P	RIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)							180=	╢		1					
							L	OTAL DD'L FEE	 -		OR	+360	-			
		(Column 1)	· .	. (Column	2) (Column 3)			<u> </u>		OR	ADD'L F	EE		<u> </u>	
Tota		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	1.	PRESENT EXTRA		RATE (\$)	ĮĮ	ADOI- IONAL EE (\$)		RATE (5)	ADDI	Au i	
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07 CFR 1.1	6(7)))		Minus	***	=		-	100	_		OR .		-			
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If ihe eat-	v la sotu	mm 1 is less the mbor Previous	٠.				TO	TAL. D'L FEE	ني بسنج		.	TOTAL ADD'L FEE	+	· · .	ㅓ	

The Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For (Total or Independent) is the highest number (ound in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Depentment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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